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	FEE TRANSMITTAL				EXPRESS MAIL NO. EM035620035US Complete if Known						
				(H.R. 4818).	Application	Application Number Filing Date		10/516,761			
1 2				L	Filing Date			September 14, 2005			
	<i>E</i> /	For FY	2007		First Name	d Inventor	Aloys Wol	ben			
APIE	W. C.	Examiner Name		Gertrude Arthur-Jeanglaud							
-	Applicant claim		atus. See 37 C	FR 1.27	Art Unit		3661				
	TOTAL AMOUNT		Attorney Docket No. 970054.478USPC								
	METHOD OF PAYMENT (check all that apply)										
	Check Credit Card Money Order Other (please identify):										
	Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC										
	For the above	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
					Charge fee(s) indicated below, except for the filing fee Charge any underpayments or credit any overpayments						
			e(s) or underpa	yments g	Ky Charge any	underpay	ments or cred	lit any o	verpayments		
	of fee(s) under 37 CFR 1.16 and 1.17 Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
	FEE CALCULATION	ON									
	1. BASIC FILING	SEARCH, ANI	DEXAMINATIO	N FEES							
					H FEES	IINATION					
		Small Entit			Small Entity		FEES <u>Small</u>				
	Application Type	Fee (\$)	Foc (\$)	Fac (6)			Entity	_			
	Utility	300	<u>Fee (\$)</u> 150	<u>Fee (\$)</u> 500	Fee (\$)	Fee (\$)		Fe	ees Paid (\$)		
	Design	200	100	100	250	200	100				
	Provisional	200	100	0	50	130	65				
	2. EXCESS CLAIR		100	U	0	0	0				
Į	Fee Description Small Entity										
İ	Each claim over 20	(including Reissu	ues)					Fee (\$)	Fee (\$)		
	Each independent c					50 200	25 400				
		Multiple dependent claims									
١	Total Claims	Extra Cla	ims Fe	e (\$)	Fee Paid	(\$)	Multiple		180		
	21 -20 or H			<u>50</u> =	<u>0</u>	G 1	Fee (\$)	Multiple Dependent Claims Fee (\$) Fee Paid (\$)			
.	HP = highest numb	er of total claim			₹		<u>, ee (\$)</u>		ree Palu (\$)		
	Indep. Claims	Extra Cla	_	e (\$)	Fee Paid	(\$)					
ļ	<u>5</u> -3 or HF			200 =	0	77					
- [HP = highest number of independent claims paid for, if greater than 3.										
-	3. APPLICATION SIZE FEE										
	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
	Total Sheets										
	-100 = /50 = (round up to a whole number) x										
Ì	4. OTHER FEE(S) Fees Paid (\$)										
1	Non-English Specification, \$130 fee (no small entity discount)										
	Other (e.g., late filing surcharge): Petition for Extension of Time (2 months) 450										
	SUBMITTED BY										
	Signature	nature Registration No. (Attorney/Agent) 47,435 Telephone 206-622-4900									
	Name (Print/Type)	Timothy L. Bo	oller	7 (Διιστ	ieyr/gent)		Date		2, 2007		
-									-,		



PETITION FOR EXTENSION OF TIME UNDER 37 CFF	Docket Number								
	970054.478USPC								
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005)	(H.R. 4818).)								
Application Number 10/516,761	Filed September 14, 2005								
For SYSTEM AND METHOD FOR SUPPLEMENTING AND OVEHICLE	CALCULATING E	NERGY CONSUMED BY A							
Art Unit 3661		Examiner Gertrude Arthur- Jeanglaud							
This is a request under the provisions of 37 CFR 1.136(a) treply in the above identified application.	o extend the perio	od for filing a							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
<u>Fee</u>	Small Er	ntity Fee							
One month (37 CFR 1.17(a)(1)) \$120	\$6	\$							
Two months (37 CFR 1.17(a)(2)) \$450	\$2	25 \$ <u>450</u>							
Three months (37 CFR 1.17(a)(3)) \$1020	\$5	10 \$							
Four months (37 CFR 1.17(a)(4)) \$1590	\$7	95 \$							
Five months (37 CFR 1.17(a)(5)) \$2160	\$10	980 \$							
Applicant claims small entity status. See 37 CFR 1.27.									
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this application to a Deposit Account.									
The Director is hereby authorized to charge any fees which may be required,									
or credit any overpayment, to Deposit Account Number <u>19-1090</u> . I have enclosed a duplicate copy of this sheet.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71									
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).									
attorney or agent of record. Registration No. 47,435									
attorney or agent under 37 CFR 1.34.									
Registration number if acting under 37 CFR 1.34	· ·								
July 12, 2007									
Signature	Date								
Timothy L. Boller	2	06-622-4900							
Typed or printed name		Telephone Number							

450.00 OP